## L12000/19237

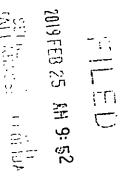
(Requestor's Name)							
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PICK-UP WAIT MAIL							
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## **COVER LETTER**

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations				
SUBJ	FLH HOLDINGS OF FLORI	DA, LLC			
SUBJ	Name of Limited Liability Company				
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Offi	ice Change and fe	e(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to the fo	llowing:		
Adar	n D. Roark				
	Name of Person		-		
Roar	k Law Firm, P.A.				
	Firm/Company		-		
P.O.	Box 3584881		_		
	Address				
Gain	esville, FL 32635				
	City/State and Zip Code		•		
adar	n@adamroarklaw.com				
-	E-mail address: (to be used for future and	nual report notific	ation)		
For fu	orther information concerning this matter	, please call:			
Adar	n Roark	352 at (	226-8005		
	Name of Person		Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314		
	Enclosed is a check for the following	g amount:			
	☑ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

. Ni	ame of the limited liability company: FLH Holdings	of Florid	a, LLC 		
. (a)		(b)			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address	of limited liability company: BE POST OFFICE BOX)	
	17505 46th Avenue North	•	17505 46th Avenue North		
	Plymouth, MN 55446		Plymouth, MN 5544	outh, MN 55446	
	09/18/2012	L	12000119237		
٠.	Date of filing/registration in Florida	→ <sub>4.</sub> —	Document n	umber	
(0)	CT Corporation System				
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET.  1200 South Pine Island Road	<u></u>			
	Plantation, FL	33324			
	Adam D. Roark  Enter name of NEW Registered Agent and/or NEW Registered	ess:	THE 25 MI		
	NEW Registered Office Address:			H 9:	
	1617 NW 16th Avenue	_		9. 5.	
	Gainesville	32605		Z	
he chargent was/whe art	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members existly accept the appointment as registered agent and age to so of all statutes relative to the proper and complete the statutes of my position as registered agent as provided rely reflect a change in the registered office address, I	t the registe iability con of the limited lia	ered office and the bus appany, it is hereby coned liability company oblitity company.  STEVEN  Printed or type on this capacity. I furth	firmed that the change(s) or as otherwise provided in sed name of signee	